August 4th, 2005, 1:00 – 4:00 pm
Maine Emergency Medical Services Office
500 Civic Center Drive
Augusta, Maine

Present:
Dan Palladino, EMT-P, Delta Ambulance, Wtvl
Dwight Corning, EMT-P, Maine EMS
Kevin Marston, EMT-P, Wells EMS/PACE
Carol Pillsbury, EMT-P, Northstar Ambulance
Charlie Mock, EMT-P, Turner, ME
Cathy Case, RN, LifeFlight of Maine
Bill Zito, Mid Coast EMS
Diane Delano, Poland, ME
Chief Bill St. Michel, Durham FD
Chief Daniel Moore, Wells Fire Department
Brian Mullis, EMT-P, Mayo Ambulance
Paul Marcolini, EMT -P

Not Present:
Susan Dupler, RN, Waldo County Hospital
Beth Collamore, MD, Aroostook EMS
Skip Stewart-Dore, SMCC
Steve Leach, RN, EMT-P, Mid Coast EMS
Holly Scribner, Cushing Rescue
Jonathan Ward, EMT, St. George Fire – EMS

1. **Review/Approval of Notes from 7/7 meeting**

   a. Minutes approved by workgroup with no changes.

2. **Discuss – Prioritize the Action Items**

   a. **Prioritize HR and Training Action Items**

      i. 4.3.d – This item did pass and will become law in Jan. '07

      ii. 4.3.f – This system is running and available, however, the group doesn't believe it is utilized to its full potential

         1. Group would like to prioritize this as last due to the low level of importance as compared to the other action items.

iii. 4.3.a and b – should be combined as they are so closely linked

    1. Group agrees that these two action items could be placed at the top of the priority list.

iv. 4.3.c – Group agreed to tackle this second

v. Action items prioritized as follows: a/b, c, e and f (in order)

b. Prioritize PIER Action Items

i. To effectively perform the following tasks, an addition to the 4.7.c should be made that includes a way to inform and market directly to the internal EMS system BEFORE group attempts to perform 4.7.c as the report states.

ii. Action items Prioritized as follows: c, b, a, d

iii. The group will address the PIER Action items after the HR and Training action items have been addressed.

c. Assignments – did we get the info that we wanted and does that information provide what we thought it would?

i. Jonathan Ward submitted educational data (summary of CEH and licensure programs data collected from the 6 EMS regions) to the group.

    1. It could be possible that this data can be interpreted in very different ways. This may prove that the information may not be as useful as originally thought.

    2. Group will ask Jonathan to break out this information by new programs and old programs. Should there be a presentation to the workgroup about this process? Procedure is different per each type of program (whether new or old).

    3. This information could be directly related to the action item 4.3.c.

    4. If the numbers are accurate, does it show that there are too many FTE hours being used?

    5. Workgroup would like a presentation on the National accreditation process.

    6. 4.3 b seems to be more apt to institutional (state) and 4.3.a is for individuals (regional)

    7. Group suggested Dan present to the group on the following

      a. Continued education information and accreditation information (NAEMS)

ii. 4.3.c - How is the new licensure process going to effect the workgroup's discussion? Group feels they need to have more accurate information in order to deal with this action item. Could group get information from other states to see how they implement CEH licensure and what their processes are? Workgroup, Charlie, Diane and Dan, to research other states and bring back the info to the next meeting. Charlie, Diane and Dan will develop questions for Dwight to e-mail to 56 other "Dwights".

iii. Request from each region: their approval process of CEH courses to see what each region is doing. This would be helpful to have so the workgroup can decide what is actually going on (this includes the state office staff's time taken to receive and process as well).

iv. Dwight reported on the AVOC numbers he collected. There cannot be a new field added to the current form, however on the new system, a field may be added.

v. How will the new licensure process effect our discussions? Drexell presented to workgroup:

    1. Current system is from 1986; however, a new Oracle system is now being developed that will interface between an online web based system and a backend database. This means data could be entered real time, over the web and approved online vs. submission of a hard copy form for data entry by Maine EMS. Eventually, this will be done for both licensure courses and continued education. The intent will be to link together both National Registry information and state information. System is to take effect Jan. 07, however, this has not been approved yet by the board because of some financial concerns. The continuing education piece will not be online until sometime next year.
    2. Workgroup, per Drexell's explanation, can be certain that the web based system will happen and client base system is being phased in.
    3. The workgroup should be focused on designing a system that is ideal from their point of view – the system can be designed around that ideal.

      vi. Dan explained he pays for all his people to go through AVOC training. Because everyone is AVOC trained, he makes up the money spent on the training with insurance premium savings.

     vii. 4.3.e – Recommendation:

        1. Group recommends: To broaden the review of existing programs to determine equivalency with AVOC.
        2. Group to review this recommendation for the next meeting and possibly approve.
        3. MMDFE has expressed interest in collaborating on funding for AVOC\EVOC training resources.
        4. Add on: an AVOC position will be put back on the legislative priority list. This must be fulfilled to meet current 1/07 deadline.

3. Plan next meeting:

a. Next meeting: September 1st, 2005 from 1-3 pm at the EMS Services Office.
b. Housekeeping: If an absence of a workgroup member exceeds 2 meetings, they will no longer be invited to the workgroup meetings and will be taken off the correspondence list.
c. Next Steps: Group to continue with the priorities as listed.